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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Sharon	
	your government-issued picture identification (for example, your driver's license or passport).	First name	First name
		Middle name	Middle name
	Bring your picture	Keith	
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-5069	

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Document Case number (if known) Debtor 1 Sharon Keith

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		1019 Lois PI Apt 102				
		Joliet, IL 60435 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Will				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing	Check one:	Check one:			
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Document Case number (if known) Debtor 1 Sharon Keith

7.	The chapter of the Bankruptcy Code you are				, see Notice Required by and check the appropria	y 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy ate box.			
	choosing to file under	■ Cha	■ Chapter 7						
		☐ Cha	apter 11						
		☐ Cha	apter 12						
		☐ Cha	apter 13						
8.	How you will pay the fee	_ a	about how yo	ou may pay. Typically, if attorney is submitting y	you are paying the fee y	cck with the clerk's office in your local court for more details vourself, you may pay with cash, cashier's check, or money half, your attorney may pay with a credit card or check with			
				y the fee in installmente in Installments (Officia		tion, sign and attach the Application for Individuals to Pay			
			request that	nt my fee be waived (Y	ou may request this opti	on only if you are filing for Chapter 7. By law, a judge may,			
		а	applies to yo	ur family size and you a	re unable to pay the fee	your income is less than 150% of the official poverty line that in installments). If you choose this option, you must fill out ficial Form 103B) and file it with your petition.			
9.	Have you filed for bankruptcy within the	■ No.							
	last 8 years?	☐ Yes	•						
			District		When	Case number			
			District		When	Case number			
			District		When	Case number			
10	Are any bankruptcy								
	cases pending or being	■ No							
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes							
			Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
11.	Do you rent your	□ No.	Go to	ine 12.					
	residence?	■ Yes	Has yo	our landlord obtained an	eviction judgment agair	nst you and do you want to stay in your residence?			
		- 165		No. Go to line 12.					
			_	Yes. Fill out <i>Initial Stat</i> bankruptcy petition.	tement About an Evictior	a Judgment Against You (Form 101A) and file it with this			

Case 16-25560 Doc 1 Filed 08/09/16 Entered 08/09/16 14:48:04 Desc Main Document Page 4 of 51 Case number (if known) Debtor 1 Sharon Keith Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Chapter 11 of the Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). ☐ Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? ☐ Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 Sharon Keith Document Page 5 of 51 Case number (if known)

Part 5: Exp

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) **Sharon Keith** Debtor 1 **Answer These Questions for Reporting Purposes** Part 6: 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10.000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **□** \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100.000.001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Sharon Keith Signature of Debtor 2 **Sharon Keith** Signature of Debtor 1 Executed on August 9, 2016 Executed on MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Sharon Keith Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Joseph F Lentner	Date	August 9, 2016
Signature of Attorney for Debtor		MM / DD / YYYY
Local Electric		
Joseph F Lentner		
Printed name		
Swanson & Desai, LLC		
Firm name		
670 W Hubbard		
Suite 202		
Chicago, IL 60654		
Number, Street, City, State & ZIP Code		
Contact phone 312-666-7882	Email address	kc@chicagobankruptcyattorney.com
6291735		
Bar number & State		

		1706.0111	tii Paue o ui s	<u> </u>	
Fill in this inform	nation to identify your	case:			
Debtor 1	Sharon Keith				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)					☐ Check if this is ar amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Pai	t 1: Summarize Your Assets		
		Your as	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	12,975.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	12,975.00
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	16,885.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.0
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	9,988.0
	Your total liabilities	\$	26,873.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,273.88
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,264.00
⊃ar	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sch	nedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	personal,	family, or

- household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form	_	0.070.00
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	\$	2,870.80

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Tota	al claim
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

			Docu	ment	Page 10 of 51			
Fill in	this info	rmation to identify your	case and this filing:					
Debto	r 1	Charan Kaith						
Debio	1 1	Sharon Keith First Name	Middle Name		Last Name			
Debto	r 2							
	e, if filing)	First Name	Middle Name		Last Name			
Linitor	N States D	Contributor Court for the	NORTHERN DISTRI	CT OF ILLI	NOIS			
Office	J States D	Sankruptcy Court for the:	NORTHERN DISTRI	OT OF ILLI	11013			
Case	number							Check if this is an
					_		_	amended filing
~ · · ·	–	4004/5						
Offic	cial Fo	orm 106A/B						
Sch	nedu	le A/B: Prop	ertv					12/15
				nly once If	an asset fits in more than or	ne category list the a	esat in the	
think it informa	fits best.	Be as complete and accura ore space is needed, attach	ate as possible. If two ma	arried peopl	le are filing together, both al ne top of any additional page	re equally responsible	ofor supply	ing correct
Part 1:	Describ	e Each Residence, Building	g. Land. or Other Real Es	state You O	wn or Have an Interest In			
			<u></u>					
1. Do y	ou own or	have any legal or equitabl	e interest in any residen	ce, building	, land, or similar property?			
.	lo. Go to Pa	out O						
ЦΥ	es. Where	e is the property?						
Part 2:	Describ	e Your Vehicles						
	20002							
					whether they are registe		any vehic	les you own that
someo	ne else di	rives. If you lease a vehic	le, also report it on Sch	าedule G: E	xecutory Contracts and U	nexpired Leases.		
3 Car	s vans t	trucks, tractors, sport u	tility vehicles motoro	vcles				
o. Oui	o, vano, t	iraoko, traotoro, oport a	tility verilloles, motore	yoloo				
	lo							
■ Y	'es							
3.1	Make:	Chevrolet	Who has an i	intoroct in th	ne property? Check one	Do not deduct sec	ured claims	or exemptions. Put
3.1		Sonic			ie property? Check one			aims on Schedule D:
	Model:		Debtor 1 o	,		Creditors with Ha	ve Claims S	Secured by Property.
	Year:	2015	☐ Debtor 2 o	·=		Current value of		urrent value of the
					•	entire property?	pc	ortion you own?
Г	Other info	rmation:	At least or	e of the debi	tors and another			
			☐ Chook if 4	hio io aamm	unity property	\$11,725	5.00	\$11,725.00
			(see instruc		idility property			, ,
			`					
					icles, other vehicles, and			
Exa	mples: Bo	ats, trailers, motors, pers	onal watercraft, fishing	vessels, sr	nowmobiles, motorcycle ad	ccessories		
	l-							
☐ Y	'es							
					rom Part 2, including an			\$11,725.00
.pag	ges you h	nave attached for Part 2	. Write that number he	ere		=>		\$11,725.00
	_						-	
Part 3:		e Your Personal and Hous						
Do yo	u own or	have any legal or equit	able interest in any o	f the follow	ving items?			rent value of the
								tion you own?
								not deduct secured ns or exemptions.
6. Ho u	usehold g	goods and furnishings					Ciall	no or oxomptions.

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

Debtor 1	Document Page 11 of 51 Sharon Keith Case 10-25500 Doc 1 Filed 08/09/16 Efficied 08/09/16 14.48.04 Document Page 11 of 51 Case number (if known)	Desc Main
■ Yes	Describe	
	used household goods, furniture, couch bed, lamps, kitchen table	\$250.00
□ No	nics les: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music of including cell phones, cameras, media players, games Describe	collections; electronic devices
	used consumer electronics, tv, dvd player, cell phone, computer	\$400.00
Examp ■ No	ibles of valueoles: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin other collections, memorabilia, collectiblesDescribe	, or baseball card collections;
Examp	nent for sports and hobbies eles: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes musical instruments Describe	and kayaks; carpentry tools;
■ No	ms sples: Pistols, rifles, shotguns, ammunition, and related equipment Describe	
□ No	es sples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Describe	
	used clothing	\$300.00
■ No □ Yes	ples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, g	gold, silver
Exam ■ No	arm animals uples: Dogs, cats, birds, horses Describe	
■ No	ther personal and household items you did not already list, including any health aids you did not list. Give specific information	
	the dollar value of all of your entries from Part 3, including any entries for pages you have attached Part 3. Write that number here	\$950.00
	escribe Your Financial Assets	
Do you o	wn or have any legal or equitable interest in any of the following?	Current value of the

Current value of the portion you own?
Do not deduct secured claims or exemptions.

De	btor 1	Case 16-2556 Sharon Keith	60 Doc 1	Filed 08/09/16 Document	Entered 08/09/16 14:48:04 Page 12 of 51 Case number (if known)	Desc Main
		<u>Onaron Rom</u>				
	□ No			our home, in a safe dep	oosit box, and on hand when you file your petit	ion
					Cash	\$50.00
17.		its of money				
	<i>Examp</i> □ No			al accounts; certificates counts with the same in	of deposit; shares in credit unions, brokerage stitution, list each.	houses, and other similar
	_			Institution	name:	
		17.	.1. Prepaid Ca	ard Pre paid	Debit card	\$0.00
18.	Bonds.	, mutual funds, or pul	blicly traded sto	cks		
	Examp			rith brokerage firms, mo	ney market accounts	
	■ No □ Yes		Institution or is	ssuer name:		
19.	Non-pu		nd interests in ir	ncorporated and uning	corporated businesses, including an interes	st in an LLC, partnership, and
	■ No					
	⊔ Yes.	Give specific informati	Name of entity:		% of ownership:	
	Negoti Non-ne ■ No	iable instruments includ	de personal check are those you can	s, cashiers' checks, pro	negotiable instruments omissory notes, and money orders. by signing or delivering them.	
	— 103.		Issuer name:			
21.		nent or pension acco ples: Interests in IRA, E		1(k), 403(b), thrift savin	gs accounts, or other pension or profit-sharing	plans
	■ No □ Yes.	List each account sepa Туј	arately. pe of account:	Institution	name:	
	Your s		osits you have ma		ntinue service or use from a company ectric, gas, water), telecommunications compa	nies, or others
	_ :::			Institution	name or individual:	
		Re	ental deposit	Landlord	I	\$250.00
						<u> </u>
	■ No	,			or life or for a number of years)	
	☐ Yes	lssuer n	ame and descript	ion.		
	26 U.S.	ts in an education IRA C. §§ 530(b)(1), 529A(l			ogram, or under a qualified state tuition pr	ogram.
	■ No □ Yes	Institutio	on name and desc	cription. Separately file	the records of any interests.11 U.S.C. § 521(c)	:
25.	Trusts,	, equitable or future ir	nterests in prope	erty (other than anythi	ng listed in line 1), and rights or powers ex	ercisable for your benefit
	■ No □ Yes.	Give specific informati	ion about them			

		Case 16-25560	Doc 1	Filed 08/09/16 Document	Entered 08/09/16 14:48:04 Page 13 of 51_	Desc Main
Debto	r 1	Sharon Keith		Document	Case number (if known)	
<i>E.</i>	xampi No	, copyrights, trademarks les: Internet domain names Give specific information a	s, websites, p			
27 Lie	cense	es, franchises, and other	general inta	ngibles		
<i>E.</i>	<i>xampl</i> No	les: Building permits, exclu	sive licenses	, cooperative association	n holdings, liquor licenses, professional licens	es
		Give specific information a	bout them			
Mone	y or p	roperty owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Ta	x refu	ınds owed to you				
		Give specific information ab	oout them, inc	cluding whether you alre	ady filed the returns and the tax years	
29. Fa	mily s	support				
_E	xampl		alimony, spo	usal support, child suppo	ort, maintenance, divorce settlement, property	settlement
		Give specific information				
		·				
		mounts someone owes y les: Unpaid wages, disabili benefits; unpaid loans	ty insurance į		efits, sick pay, vacation pay, workers' compe	nsation, Social Security
		Give specific information	•			
31. Int	terest	s in insurance policies				
_E	xampl		e insurance; h	nealth savings account (l	HSA); credit, homeowner's, or renter's insurar	nce
		Name the insurance compa	inv of each po	olicy and list its value.		
	. 00		pany name:	oney and not no raide.	Beneficiary:	Surrender or refund value:
If so	you a omeor	erest in property that is d re the beneficiary of a living he has died.			ed surance policy, or are currently entitled to rec	eive property because
		Give specific information				
	165. 1	Give specific information				
	xampl	against third parties, who les: Accidents, employmen			it or made a demand for payment s to sue	
■ ,	Yes. I	Describe each claim				
			Workn	nens compensation	claim	Unknown
34. Ot		ontingent and unliquidate	ed claims of	every nature, including	g counterclaims of the debtor and rights to	set off claims
		Describe each claim				
35. A r	ny fina	ancial assets you did not	already list			
		0.500				
⊔,	Yes. (Give specific information				
		ne dollar value of all of yo		om Part 4, including a	ny entries for pages you have attached	\$300.00

		Case 16-25560	Doc 1	Filed 08/09/1 Document	6 Entered 0. Page 14 of	08/09/16 14:48:04 51	Desc Main	
Debto	or 1	Sharon Keith				Case number (if known)		
Part 5	Desc	ribe Any Business-Related	Property You	Own or Have an Intere	est In. List any real est	ate in Part 1.		
27 De		vn or have any legal or equi	table interest	in any by aireas relate	d managers/2			
_	No. Go to		table interest	in any business-relate	a property?			
_		to line 38.						
_	165. 00	to line 36.						
Part 6		ribe Any Farm- and Comme			Own or Have an Intere	est In.		
46. D	o vou c	own or have any legal or	· equitable in	terest in any farm-	or commercial fishi	ng-related property?		
	•	o to Part 7.		,				
	☐ Yes.	Go to line 47.						
Part 7	7:	Describe All Property You	Own or Have a	n Interest in That You	Did Not List Above			
E	Example No	nave other property of an es: Season tickets, country ive specific information	y club membe					
54.	Add the	e dollar value of all of yo	our entries fr	om Part 7. Write tha	t number here			\$0.00
Part 8	3: L	ist the Totals of Each Part of	of this Form					
55.	Part 1:	Total real estate, line 2						\$0.00
56.	Part 2:	Total vehicles, line 5			\$11,725.00			
57.	Part 3:	Total personal and hous	sehold items	, line 15	\$950.00			
58.	Part 4:	Total financial assets, li	ine 36		\$300.00			
59.	Part 5:	Total business-related p	property, line	45	\$0.00			
60.	Part 6:	Total farm- and fishing-	related prop	erty, line 52	\$0.00			
61.	Part 7:	Total other property not	t listed, line t	54 +	\$0.00			
62.	Total p	ersonal property. Add lin	nes 56 throug	h 61	\$12,975.00	Copy personal property t	otal\$1	2,975.00
63.	Total o	f all property on Schedu	ıle A/B. Add I	ine 55 + line 62			\$12,9	75.00

Official Form 106A/B Schedule A/B: Property page 5

		17/1/11111		
Fill in this infor	mation to identify your	case:		
Debtor 1	Sharon Keith			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if the
				amended

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions	are vou claiming	? Check one only	. even if vour s	pouse is filing with vol

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that all Schedule A/B that lists this property portion you own	•
Copy the value from Check only one box for each exemption. Schedule A/B	
used household goods, furniture, \$250.00 Solution \$250.00 \$250.00 \$250.00	001(b)
Line from <i>Schedule A/B</i> : 6.1 100% of fair market value, up to any applicable statutory limit	
used consumer electronics, tv, dvd \$400.00 \$400.00 \$400.00	001(b)
Line from Schedule A/B: 7.1 100% of fair market value, up to any applicable statutory limit	
used clothing \$300.00 ■ \$300.00 735 ILCS 5/12-10	001(a)
100% of fair market value, up to any applicable statutory limit	
Cash Line from Schedule A/B: 16.1 \$50.00 \$50.00 \$735 ILCS 5/12-10	001(b)
100% of fair market value, up to any applicable statutory limit	
Rental deposit: Landlord \$250.00 \$250.00 \$250.00	001(b)
100% of fair market value, up to any applicable statutory limit	

Case 16-25560 Doc 1 Filed 08/09/16 Entered 08/09/16 14:48:04 Desc Main Document Page 16 of 51 Debtor 1 Sharon Keith Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Workmens compensation claim 820 ILCS 305/21 Unknown Line from Schedule A/B: 33.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Yes

		Document	Page 17	of 51		
Fill in this informat	tion to identify you	ur case:				
Dahtan 4	01					
Debtor 1	Sharon Keith First Name	Middle Name	Last Name			
Dobtor 2	i iist Name	Wildule INAME	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
(Operator II, IIIII)	- not riamo	auto Mario	<u> Laot Hamo</u>			
United States Bankı	ruptcy Court for the	: NORTHERN DISTRICT OF	ILLINOIS			
Case number (if known)					- 0	
(II KNOWN)					_	k if this is an
					amen	ded filing
O(() F	400D					
Official Form	106D					
Schedule D	: Creditors	Who Have Claims	s Secured	by Propert	V	12/15
				<u> </u>	<u> </u>	
		If two married people are filing tog out, number the entries, and attach				
1. Do any creditors ha	ve claims secured b	y vour property?				
		,, , , ,	ann and a deal and a second	on hanna a south of the	a managed and that of	
□ No. Check th □ □	is box and submit t	his form to the court with your otl	ner schedules. Yo	ou nave nothing else t	o report on this form.	
Yes. Fill in al	I of the information	below.				
Part 1: List All S	Secured Claims					
<u> </u>				Column A	Column B	Column C
		more than one secured claim, list the a particular claim, list the other cred		Amount of claim	Value of collateral	Unsecured
		ical order according to the creditor's r		Do not deduct the	that supports this	portion
		_		value of collateral.	claim	If any
2.1 Ally Financi	al	Describe the property that secur	es the claim:	\$16,885.00	\$11,725.00	\$5,160.00
Creditor's Name		2015 Chevrolet Sonic 400	0 miles			
		As of the date you file, the claim	is: Chook all that			
200 Renaiss		apply.	15. Check all that			
Detroit, MI 4	8243	☐ Contingent				
Number, Street, Cit	ty, State & Zip Code	☐ Unliquidated				
		□ Disputed				
Who owes the debt	? Check one.	Nature of lien. Check all that app	ly.			
Debtor 1 only		☐ An agreement you made (such	as mortgage or sec	ured		
Debtor 2 only		car loan)				
Debtor 1 and Debtor	or O only	☐ Statutory lien (such as tax lien,	maahaniala lian)			
_		_ ' ` `	mechanic's lien)			
At least one of the		☐ Judgment lien from a lawsuit				
Check if this clain community debt	n relates to a	☐ Other (including a right to offset	ː)			
community debt						
	Opened					
	03/15 Last					
	Active					
Date debt was incurre	ed 7/23/16	Last 4 digits of account n	_{umber} 4044			
Add the dollar value	e of vour entries in C	Column A on this page. Write that n	umber here:	\$16,88	85.00	
	=	the dollar value totals from all pag				
Write that number I				\$16,88	35.00	
D (0 11 (0)		5 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
Part 2: List Other	s to Be Notified to	or a Debt That You Already List	ed			
		e notified about your bankruptcy f				
		owe to someone else, list the credit				
debts in Part 1, do no		t you listed in Part 1, list the addition is page.	onal creditors here	. II you do not nave ad	uitional persons to be i	ionneu ioi any
		, -9				
☐ Name, Number	, Street, City, State &	Zip Code	On which	h line in Part 1 did vou a	nter the creditor? 2.1	
Ally Financ		•	On which	ar mie ni raiti ulu you e	mor the oreunor?	-
Po Box 380			Last 4 d	ligits of account number		
Bloomingto	on. MN 55438					

		Document	Page 1	8 of 51			
Fill in this infor	mation to identify your	case:					
Debtor 1	Sharon Keith						
	First Name	Middle Name	Last Name				
Debtor 2							
Spouse if, filing)	First Name	Middle Name	Last Name				
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT OF IL	LINOIS				
Case number							
(if known)					☐ Check if this is an		
			,		amended filing		
N4: -: - 1 =	400E/E						
Official Form					4045		
schedule E	=/F: Creditors W	ho Have Unsecured	Claims		12/15		
chedule D: Credi eft. Attach the Co ame and case nu	tors Who Have Claims Sec ntinuation Page to this pag mber (if known).	ured by Property. If more space is e. If you have no information to re	needed, copy	any creditors with partially secured the Part you need, fill it out, number do not file that Part. On the top of ar	the entries in the boxes on the		
	All of Your PRIORITY Un						
•	ors have priority unsecure	d claims against you?					
No. Go to I	Part 2.						
☐ Yes.							
Part 2: List A	All of Your NONPRIORIT	Y Unsecured Claims					
_ '	ors have nonpriority unsectors have nothing to report in this p	cured claims against you? art. Submit this form to the court with	your other sche	edules.			
Yes.							
unsecured cla	im, list the creditor separately	y for each claim. For each claim listed	d, identify what t	b holds each claim. If a creditor has m ype of claim it is. Do not list claims alre three nonpriority unsecured claims fill	eady included in Part 1. If more		
					Total claim		
4.1 Cda/Pd	ontiac	Last 4 digits of acc	ount number	8980	\$665.00		
Nonpriori	ty Creditor's Name						
_	Main St	When was the deb	t incurred?	Opened 08/13			
	or, IL 61364 Street City State Zlp Code	As of the date you	file, the claim i	s: Check all that apply			
	urred the debt? Check one.	,	,	эт этгэг ан атаг эрргу			
■ Debto	or 1 only	☐ Contingent					
☐ Debto	•	☐ Unliquidated					
	or 1 and Debtor 2 only						
	st one of the debtors and and	☐ Disputed Type of NONPRIOR	RITY unsecure	d claim:			
	k if this claim is for a com						
debt			ng out of a sepa	ration agreement or divorce that you d	lid not		
Is the cla	im subject to offset?	report as priority cla	ims				
■ No		·	☐ Debts to pension or profit-sharing plans, and other similar debts				
☐ Yes		Other. Specify	Collection Assoc LIC	Attorney Northwest Emerge	ncy		

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Debtor	1 Sharon Keith		Case number (if know)	
4.2	Cda/Pontiac	Last 4 digits of account number	2174	\$665.00
	Nonpriority Creditor's Name 415 E Main St	When was the debt incurred?	Opened 09/13	
	Streator, IL 61364	When was the dept incurred:	Opened 09/13	
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Collection Assoc Llc	Attorney Northwest Emergency	
4.3	Cda/Pontiac	Last 4 digits of account number	6272	\$518.00
	Nonpriority Creditor's Name 415 E Main St	When was the debt incurred?	Opened 01/12	
	Streator, IL 61364	When was the dest meaned?	Opened 01/12	
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Collection Assoc LIc		
4.4	Check into cash	Last 4 digits of account number		\$800.00
	Nonpriority Creditor's Name 3158 Singing Hills Blvd Sioux City, IA 51102	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other. Specify		

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Case number (if know)

Debtor	1 Sharon Keith		Case number (if know)	
4.5	Check N GO	Last 4 digits of account number		\$500.00
	Nonpriority Creditor's Name 4501 Souther Hills Dr	When was the debt incurred?		
	ste 23 Sioux City, IA 51106 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify		
4.6	Comcast	Last 4 digits of account number		\$500.00
	Nonpriority Creditor's Name 350 N. Wolf Road Mount Prospect, IL 60056	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	•	,	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing		
	Yes			
		Other. Specify		
4.7	Commonwealth Financial Systems Nonpriority Creditor's Name	Last 4 digits of account number		\$731.00
	245 Main Street Scranton, PA 18519	When was the debt incurred?	Opened 03/16 Last Active 07/10	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a separe report as priority claims		
	■ No	Debts to pension or profit-sharing		
	□Yes	Other Specify Medical De	bt Windy City Emer	

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Debtor 1 Sharon Keith Case number (if know) 4.8 \$77.00 **ERC/Enhanced Recovery Corp** Last 4 digits of account number 3349 Nonpriority Creditor's Name Opened 03/16 Last Active 8014 Bayberry Rd When was the debt incurred? 02/15 Jacksonville, FL 32256 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $oxed{\square}$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Collection Attorney At T 4.9 **Escallate LLC** Last 4 digits of account number 0988 \$363.00 Nonpriority Creditor's Name 5200 Stoneham Rd When was the debt incurred? **Opened 12/14** North Canton, OH 44720 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney Emp Of Will County Llc ☐ Yes 4.1 Hawkeye Adjustment 3150 \$222.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Opened 05/13 Last Active 2300 Pierce St 01/13 When was the debt incurred? Sioux City, IA 51104 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Debt Grandview Clini ☐ Yes

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Debtor 1 Sharon Keith Case number (if know) 4.1 Hawkeye Adjustment 1278 \$83.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 01/13 Last Active 2300 Pierce St When was the debt incurred? 10/12 Sioux City, IA 51104 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Medical Debt St Luke S Profe Other, Specify 4.1 **Hawkeye Adjustment** 6616 \$333.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 08/12 Last Active 2300 Pierce St When was the debt incurred? 03/12 Sioux City, IA 51104 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt oxed Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Medical Debt St Luke S Profe Other, Specify 4.1 **Hawkeye Adjustment** 8264 \$194.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 07/11 Last Active 2300 Pierce St When was the debt incurred? 03/11 Sioux City, IA 51104 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Debt St Luke S Profe ☐ Yes

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Debtor 1 Sharon Keith Case number (if know) 4.1 IC Systems, Inc 7114 \$356.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 06/16 Last Active Po Box 64378 When was the debt incurred? 11/15 Saint Paul, MN 55164 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Attorney At T Uverse ☐ Yes 4.1 Med Business Bureau 4001 \$381.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 10/13 Last Active 1460 Renaissance D When was the debt incurred? 07/13 Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other Specify Collection Attorney Unimed Ltd Metr 4 1 **Mercy Medical Center** \$500.00 Last 4 digits of account number Nonpriority Creditor's Name 801 5th St When was the debt incurred? Sioux City, IA 51101 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify

6

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Snaron Keith	Case number (if know)	
Methodist Hospital	Last 4 digits of account number	\$500.00
Nonpriority Creditor's Name 600 Grante st	When was the debt incurred?	
Gary, IN 46402	= , , , , , , , , , , , , , , , , , , ,	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	Пол	
_	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
•	☐ Debts to pension or profit-sharing plans, and other similar debts	
■ No	<u> </u>	
Yes	Other. Specify	
Midamerican Energy	Last 4 digits of account number	\$1,000.00
Nonpriority Creditor's Name		
PO box 657 Des Moines, IA 50306	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
St Lukes Medical Center	Last 4 digits of account number	\$1,000.00
Nonpriority Creditor's Name 2720 Stone Park Blvd	When was the debt incurred?	4 1,0 2 3 3 2
Sioux City, IA 51104	- As the basis file devicts of	
Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other Specify	

Case 16-25560 Doc 1 Filed 08/09/16 Entered 08/09/16 14:48:04 Desc Main Document Page 25 of 51 Case number (if know) Debtor 1 Sharon Keith 4.2 Wow \$600.00 Last 4 digits of account number 0 Nonpriority Creditor's Name When was the debt incurred? PO Box 5715 Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.1 of (Check one): Cda/Pontiac ☐ Part 1: Creditors with Priority Unsecured Claims Attn:Bankruptcy ■ Part 2: Creditors with Nonpriority Unsecured Claims Po Box 213 Streator, IL 61364 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Cda/Pontiac Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn:Bankruptcy ■ Part 2: Creditors with Nonpriority Unsecured Claims Po Box 213 Streator, IL 61364 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Cda/Pontiac Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn:Bankruptcy Part 2: Creditors with Nonpriority Unsecured Claims Po Box 213 Streator, IL 61364 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Commonwealth Financial Systems** Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

245 Main St ■ Part 2: Creditors with Nonpriority Unsecured Claims Dickson City, PA 18519 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Escallate LLC Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn:Bankruptcy ■ Part 2: Creditors with Nonpriority Unsecured Claims 5200 Stoneham Rd Ste 200 North Canton, OH 44720 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? IC Systems, Inc Line 4.14 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 444 Highway 96 East Part 2: Creditors with Nonpriority Unsecured Claims

Official Form 106 E/F

Name and Address

Med Business Bureau

Po Box 64378 St Paul. MN 55164

On which entry in Part 1 or Part 2 did you list the original creditor?

☐ Part 1: Creditors with Priority Unsecured Claims

Last 4 digits of account number

Line 4.15 of (Check one):

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Debtor 1 Sharon Keith

1460 Renaissance Dr Suite 400 Park Ridge, IL 60068

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total				
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
	6f.	Student loans	6f.	Total Claim
Total	о.	Student loans	о.	\$ 0.00
claims from Part 2	6~	Obligations original out of a consention agreement or diverse that		
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	, , ,	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 9,988.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 9,988.00

		121711111		
Fill in this infor	mation to identify your	case:		
Debtor 1	Sharon Keith			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this amended fili

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Larkin Village
Unknown

State what the contract or lease is for
lease for residence

		Docume	nt Page 28 (ול זו	
Fill in this i	nformation to identify your				
Debtor 1	Sharon Keith				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing) First Name	Middle Name	Last Name		
	,	NORTHERN DISTRICT			
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numbe	er				☐ Check if this is an amended filing
Schedu	Form 106H ule H: Your Cod		ts you may have Res	es complete and accur	12/15 ate as possible. If two married
eople are fill it out, an	iling together, both are equ	ally responsible for supp boxes on the left. Attach	olying correct information the Additional Page t	tion. If more space is r	needed, copy the Additional Page, p of any Additional Pages, write
1. Do y	ou have any codebtors? (If	you are filing a joint case, o	do not list either spouse	e as a codebtor.	
■ No □ Yes					
Arizona No. 0	in the last 8 years, have you, California, Idaho, Louisiana, Go to line 3. Did your spouse, former spouse,	Nevada, New Mexico, Pu	erto Rico, Texas, Wash		ty states and territories include
in line 2	2 again as a codebtor only i 06D), Schedule E/F (Official	f that person is a guaran	tor or cosigner. Make	sure you have listed the	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	olumn 1: Your codebtor ame, Number, Street, City, State and Z	P Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1 _N	ame			☐ Schedule D, lin☐ Schedule E/F,	
				☐ Schedule G, lin	
Ni Ci	umber Street ity	State	ZIP Code	_	
3.2				Schedule D, lin	ne
N	ame			☐ Schedule E/F, ☐ Schedule G, lin	
	umber Street	State	ZIP Code	_	
Ci	ıty	State	ZIP Code		

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C:II	in this information to identify you	u 0000								
	in this information to identify you btor 1 Sharon K									
	otor 2				_					
Uni	ted States Bankruptcy Court for	the: NORTHERN DISTRI	CT OF ILLINOIS							
	se number nown)		-			□ A □ A		ed filing ent showin	g postpetition	
0	fficial Form 106I					M	IM / DD/ \	/YYY	-	
S	chedule I: Your In	come					, 22,			12/15
spo atta	plying correct information. If y use. If you are separated and ch a separate sheet to this for the Describe Employment.	your spouse is not filing w m. On the top of any additi	ith you, do not inclu	ıde infor	mati	on about	your spe imber (if	ouse. If me known). A	ore space is	needed,
	information.						□ Empl		ing spouse	
	If you have more than one job attach a separate page with information about additional	Employment status	■ Employed□ Not employed				☐ Not employed			
	employers.	Occupation	Personal Assis	tant						
	Include part-time, seasonal, or self-employed work.	Employer's name	Dept of Rehab	Service	s					
	Occupation may include stude or homemaker, if it applies.	nt Employer's address	1617 W Jeffers Joliet, IL 60435							
		How long employed t	there? 4 years	s			_			
Par	t 2: Give Details About	Monthly Income								
	mate monthly income as of thuse unless you are separated.	e date you file this form. If	you have nothing to r	report for	any	line, write	\$0 in the	space. Inc	clude your no	n-filing
	u or your non-filing spouse have e space, attach a separate shee		ombine the information	on for all	empl	oyers for	that perso	on on the li	nes below. If	you need
						For Dek	otor 1		btor 2 or ng spouse	
2.	List monthly gross wages, s deductions). If not paid month			2.	\$	2,	,054.48	\$	N/A	
3.	Estimate and list monthly ov	vertime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Ad	d line 2 + line 3.		4.	\$	2,05	54.48	\$	N/A	

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Debt	or 1	Sharon Keith	-	C	ase num	ber (if kno	own)				
					For Del	otor 1			Debtor filing s	2 or spouse	
	Cop	by line 4 here	4.	-	\$	2,054	.48	\$		N/A	_
5.	l ist	all payroll deductions:									
J.	5a.	Tax, Medicare, and Social Security deductions	5a		\$	469	02	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$.00	\$—		N/A	
	5c.	Voluntary contributions for retirement plans	5c		\$.00	\$		N/A	
	5d.	Required repayments of retirement fund loans	5d		\$.00	\$		N/A	_
	5e.	Insurance	5e) .	\$.00	\$		N/A	<u></u>
	5f.	Domestic support obligations	5f.		\$	0	.00	\$		N/A	<u>\</u>
	5g.	Union dues	5g	,	\$	60	.67	\$		N/A	_
	5h.	Other deductions. Specify:	_ 5h	1.+	\$	0	.00	⊦\$		N/A	<u>\</u>
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	530	.60	\$		N/A	<u>\</u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	,	\$	1,523	.88	\$		N/A	<u>\</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	1.	\$	0	.00	\$		N/A	
	8b.	Interest and dividends	8b		\$.00	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80	: .	\$	0	.00	\$		N/A	1
	8d.	Unemployment compensation	8d	l.	\$	0	.00	\$		N/A	<u>\</u>
	8e.	Social Security	8e) .	\$	0	.00	\$		N/A	<u>\</u>
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f. 8g		\$ \$.00	\$		N/A N/A	
	8h.	Other monthly income. Specify: Walmart net Earnings	_	,	\$.00			N/A	_
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	i	750		\$		N/	A
			Γ								
10.		•	10.	\$_	2,2	73.88	+ \$ _		N/A	= \$ _	2,273.88
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	L								
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	depe							e J. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The resident that amount on the Summary of Schedules and Statistical Summary of Certailies							12.	\$	2,273.88
13.	Do	you expect an increase or decrease within the year after you file this form	?							Comb	ined Ily income
		No									
		Voc Explain:									·

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Fill	in this information to identify your o	case:				
Deb	otor 1 Sharon Keith			Chec	k if this is:	
	otor 2				An amended filing A supplement show 13 expenses as of	ving postpetition chapter the following date:
Unit	ted States Bankruptcy Court for the: N	NORTHERN DISTRICT OF ILLING	DIS	=	MM / DD / YYYY	
	ee number					
	nown)					
Of	fficial Form 106J	_				
	chedule J: Your Ex			_		12/15
info	as complete and accurate as po ormation. If more space is neede mber (if known). Answer every q	d, attach another sheet to this f				
Par	Describe Your Householes this a joint case?	d				
	■ No. Go to line 2. □ Yes. Does Debtor 2 live in a	congrato household?				
	□ No	separate nousenoiu:				
	☐ Yes. Debtor 2 must file	e Official Form 106J-2, Expenses	for Separate Housel	nold of Debt	or 2.	
2.	Do you have dependents?	l _{No}				
	Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the					□ No
	dependents names.					☐ Yes ☐ No
						☐ Yes
						□ No
						☐ Yes ☐ No
						☐ Yes
3.	Do your expenses include	■ No	-			
	expenses of people other than yourself and your dependents'					
Par	t 2: Estimate Your Ongoing	Monthly Expenses				
Est	timate your expenses as of your penses as of a date after the band blicable date.	bankruptcy filing date unless ye	ou are using this fo lemental <i>Schedule</i>	rm as a su J, check th	oplement in a Cha e box at the top o	pter 13 case to report f the form and fill in the
the	lude expenses paid for with non- value of such assistance and ha ficial Form 106I.)				Your expe	enses
(,					
4.	The rental or home ownership payments and any rent for the gr	expenses for your residence. In ound or lot.	nclude first mortgage	4. \$		640.00
	If not included in line 4:					
	4a. Real estate taxes			4a. \$		0.00
	4b. Property, homeowner's, or			4b. \$		0.00
	4c. Home maintenance, repair4d. Homeowner's association	· · · · ·		4c. \$ 4d. \$		0.00 0.00
5.		s for vour residence, such as hor	me equity loans	-τα. φ 5. \$		0.00

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Utilities:			
6a. Electricity, heat, natural gas	6a.	\$	75.00
6b. Water, sewer, garbage collection	6b.	·	0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.		50.00
6d. Other. Specify:	6d.	·	0.00
Food and housekeeping supplies	7.	*	500.00
Childcare and children's education costs		·	
	8. 9.	\$	0.00
Clothing, laundry, and dry cleaning		\$	50.00
Personal care products and services	10.	· -	50.00
Medical and dental expenses	11.	\$	50.00
. Transportation. Include gas, maintenance, bus or train fare.	12.	\$	300.00
Do not include car payments.	13.		
Entertainment, clubs, recreation, newspapers, magazines, and books		·	0.00
Charitable contributions and religious donations	14.	>	0.00
. Insurance.			
Do not include insurance deducted from your pay or included in lines 4 or 20.	1 E o	Φ.	0.00
	15a.	·	0.00
	15b.	·	0.00
	15c.	·	100.00
	15d.	\$	0.00
. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		_	
Specify:	16.	\$	0.00
. Installment or lease payments:			
17a. Car payments for Vehicle 1	17a.	\$	449.00
17b. Car payments for Vehicle 2	17b.	\$	0.00
17c. Other. Specify:	17c.	\$	0.00
17d. Other. Specify:	17d.	\$	0.00
Your payments of alimony, maintenance, and support that you did not report as			
deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
Other payments you make to support others who do not live with you.		\$	0.00
Specify:	19.		
Other real property expenses not included in lines 4 or 5 of this form or on Schedule	I: Yo	our Income.	
20a. Mortgages on other property	20a.	\$	0.00
20b. Real estate taxes	20b.	\$	0.00
20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
· ·	20d.	\$	0.00
	20e.		0.00
. Other: Specify:		+\$	0.00
Outer. Opeoury.	۷1.	- Ψ	0.00
. Calculate your monthly expenses			
22a. Add lines 4 through 21.		\$	2,264.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$,
22c. Add line 22a and 22b. The result is your monthly expenses.		\$	2 264 00
220. Add into 22a and 22b. The result is your monthly expenses.		Ψ	2,264.00
. Calculate your monthly net income.			
	23a.	\$	2,273.88
	23b.	·	2,264.00
			2,207.00
23c. Subtract your monthly expenses from your monthly income.			
The result is your <i>monthly net income</i> .	23c.	\$	9.88
, ,		1	
. Do you expect an increase or decrease in your expenses within the year after you file	this	form?	
For example, do you expect to finish paying for your car loan within the year or do you expect your morto			ase or decrease because o
modification to the terms of your mortgage?			
■ No.			
☐ Yes. Explain here:			

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Fill in this infor	mation to identify your	c350:			
Debtor 1	Sharon Keith	case.			
Deptor 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an amended filing
You must file thi	is form whenever you fi	n connection with a bank	or amended schedules.	Making a false state	ement, concealing property, or 00, or imprisonment for up to 20
Sig	n Below				
Did you pa	y or agree to pay some	one who is NOT an attor	ney to help you fill out b	ankruptcy forms?	
■ No					
☐ Yes. I	Name of person				kruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
	alty of perjury, I declare e true and correct.	that I have read the sum	mary and schedules filed	d with this declaration	on and
X /s/ Sha	aron Keith		X		
	n Keith		Signature of I	Dehtor 2	

Date

Signature of Debtor 1

Date August 9, 2016

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		nation to identify you	r case:			
Deb	otor 1	Sharon Keith First Name	Middle Name	Last Name		
	otor 2 use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Bar	nkruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS		
Cas (if kn	e number				_	Check if this is an
Sta Be a infor	s complete a	of Financial	attach a separate sheet to	are filing together, both are	ankruptcy equally responsible for sup v additional pages, write you	
		,	arital Status and Where You	Lived Before		
1.	What is your	current marital statu	ıs?			
	☐ Married ■ Not mar	ried				
2.	During the la	ıst 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>i</i> .	
	Debtor 1 Pri	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory ico, Texas, Washington and V	
	■ No □ Yes. Ma	ke sure you fill out <i>Scl</i>	hedule H: Your Codebtors (O	fficial Form 106H).		
Par	Explai	n the Sources of You	r Income			
4.	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receiv	all businesses, including part-		ndar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$21,000.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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			Debtor 1		Debtor 2		
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc		Gross income (before deductions and exclusions)
	lendar year: to December :	31, 2015)	■ Wages, commissions, bonuses, tips	\$27,000.00	☐ Wages, com bonuses, tips	missions,	
			☐ Operating a business		☐ Operating a	business	
	endar year bef to December 3		■ Wages, commissions, bonuses, tips	\$27,000.00	☐ Wages, com bonuses, tips	missions,	
			☐ Operating a business		☐ Operating a	business	
and oth winning List each	ner public benefgs. If you are filingth	it payments; p ng a joint case ne gross incor	er that income is taxable. Exc ensions; rental income; inter e and you have income that y ne from each source separa	rest; dividends; money colle you received together, list it	cted from lawsuits; only once under De	royalties; and ebtor 1.	
			Debtor 1		Debtor 2		
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of incorporation Describe below.		Gross income (before deductions and exclusions)
Part 3:	ist Certain Pa	yments You I	Made Before You Filed for	Bankruptcy			
□ No	D. Neither De individual p During the No. Yes * Subject the During the During the No.	ebtor 1 nor Descrimanily for a programment of the p	debts primarily consumer botor 2 has primarily consumer personal, family, or household e you filed for bankruptcy, diach creditor to whom you paid ditor. Do not include paymentayments to an attorney for the on 4/01/19 and every 3 year both have primarily consumer you filed for bankruptcy, diachterist and the primarily consumer you filed for bankruptcy, diachterist and primarily consumer you filed for bankruptcy.	Imer debts. Consumer debtld purpose." d you pay any creditor a total d a total of \$6,425* or more the for domestic support oblinis bankruptcy case. Is after that for cases filed or Imer debts.	al of \$6,425* or mor in one or more pay gations, such as ch or after the date o	re? ments and th ild support ar f adjustment.	ne total amount you nd alimony. Also, do
	■ No. □ Yes	include payn	ach creditor to whom you pai nents for domestic support o his bankruptcy case.				
Credit	or's Name and	l Address	Dates of payme	nt Total amount	Amount you still owe	Was this p	ayment for

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7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one fo a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider.							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for thi	is payment		
8.	Within 1 year before you filed for bankruptinsider? Include payments on debts guaranteed or cos No Yes. List all payments to an insider		ments or transfer a	ny property on a	ccount of a debt	that benefited an		
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for thi			
Pai	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures						
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. ☐ No ☐ Yes. Fill in the details.							
	Case title Case number					Status of the case		
	Keith v. walmart	Workmens Compensation			☐ Pending ☐ On appeal ☐ Concluded			
10.	Within 1 year before you filed for bankrupte Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address	Describe the Property		oreclosed, garnis Date	hed, attached, s	eized, or levied? Value of the property		
		Explain what happened	d					
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec No Yes. Fill in the details.		luding a bank or fin	ancial institution	, set off any am	ounts from your		
	Creditor Name and Address	Describe the action the	creditor took	Date taken	action was	Amount		
12.	Within 1 year before you filed for bankrupte court-appointed receiver, a custodian, or a ■ No □ Yes		erty in the possessi	on of an assigne	e for the benefit	of creditors, a		

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Case number (if known) Document Debtor 1 Sharon Keith

Part 5: List Certain Gifts and Contribution	os		
 Within 2 years before you filed for banks No Yes. Fill in the details for each gift. 	uptcy, did you give any gifts with a total value of more t	nan \$600 per person?	•
Gifts with a total value of more than \$60 per person Person to Whom You Gave the Gift and		Dates you gave the gifts	Value
Address:			
 Within 2 years before you filed for banki ■ No □ Yes. Fill in the details for each gift or one 	ruptcy, did you give any gifts or contributions with a tota	ll value of more than	\$600 to any charity?
Gifts or contributions to charities that a more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod	total Describe what you contributed	Dates you contributed	Value
Part 6: List Certain Losses			
 Within 1 year before you filed for bankru or gambling? No Yes. Fill in the details. 	ptcy or since you filed for bankruptcy, did you lose anyt	hing because of thef	t, fire, other disaster
Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> .	Date of your loss	Value of property lost
Part 7: List Certain Payments or Transfer	s		
consulted about seeking bankruptcy or	aptcy, did you or anyone else acting on your behalf pay of preparing a bankruptcy petition? oreparers, or credit counseling agencies for services required		rty to anyone you
□ No■ Yes. Fill in the details.			
Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not N	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Swanson & Desai, LLC 670 W Hubbard Suite 202 Chicago, IL 60654 kc@chicagobankruptcyattorney.co	\$50 Attorney Fees, \$40 credit report, \$10 copy costs	8/2016	\$50.00
Access Counseling 633 W 5th Street Suite 26001 Los Angeles, CA 90071		8/2016	\$25.00

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Debtor 1 Sharon Keith

17.	Within 1 year before you filed for bankruptc promised to help you deal with your credito Do not include any payment or transfer that you No	rs or to make payments		half pay or transfer any prope	erty to anyone who
	Yes. Fill in the details.				
	Person Who Was Paid Address	Description and va	alue of any property	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankrupt transferred in the ordinary course of your be include both outright transfers and transfers mainclude gifts and transfers that you have alread No Yes. Fill in the details.	usiness or financial affa ade as security (such as th	irs? ne granting of a secu		
	Person Who Received Transfer Address	Description and va property transferre	ed	Describe any property or payments received or debts paid in exchange	Date transfer was made
	Person's relationship to you			· ·	
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro ■ No □ Yes. Fill in the details.		/ property to a self-	settled trust or similar device	of which you are a
	Name of trust	Description and va	alue of the property	transferred	Date Transfer was made
Pai	t 8: List of Certain Financial Accounts, Ins	struments, Safe Deposit	Boxes, and Storage	e Units	
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, association of the same of the s	or other financial accoun	ts; certificates of d		
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account o instrument	r Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 y cash, or other valuables?	ear before you filed for	bankruptcy, any sa	fe deposit box or other depos	itory for securities,
	■ No □ Yes. Fill in the details.				
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acco Address (Number, St State and ZIP Code)		cribe the contents	Do you still have it?
22.	Have you stored property in a storage unit o ■ No □ Yes. Fill in the details.	or place other than your	home within 1 year	before you filed for bankrupt	cy?
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		cribe the contents	Do you still have it?

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Case number (if known) Document

Debtor 1 Sharon Keith

Pai	t 9: Identify Property You Hold or Control for S	omeone Else				
23.	Do you hold or control any property that someon for someone.	ne else owns? Include any proper	ty yc	ou borrowed from, are storing for	, or hold in trust	
	No					
	☐ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Des	scribe the property	Value	
Pai	t 10: Give Details About Environmental Informat	tion				
For	the purpose of Part 10, the following definitions a	pply:				
	Environmental law means any federal, state, or letoxic substances, wastes, or material into the air regulations controlling the cleanup of these substances.	, land, soil, surface water, ground	_			
	Site means any location, facility, or property as of to own, operate, or utilize it, including disposal s		law,	whether you now own, operate, o	or utilize it or used	
	Hazardous material means anything an environm hazardous material, pollutant, contaminant, or si		s was	ste, hazardous substance, toxic s	ubstance,	
Rep	ort all notices, releases, and proceedings that you	u know about, regardless of wher	n the	y occurred.		
24.	Has any governmental unit notified you that you	may be liable or potentially liable	und	er or in violation of an environme	ental law?	
	-					
	■ No □ Yes. Fill in the details.					
	Yes. Fill in the details. Name of site	Governmental unit		Environmental law, if you	Date of notice	
	Address (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State an ZIP Code)	d	know it	Date of Hotice	
25.	Have you notified any governmental unit of any r	elease of hazardous material?				
	No					
	Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		Environmental law, if you know it	Date of notice	
26.	Have you been a party in any judicial or administ	rative proceeding under any envi	ironn	nental law? Include settlements a	nd orders.	
	■ No					
	Yes. Fill in the details.					
	Case Title	Court or agency	Nat	ure of the case	Status of the	
	Case Number	Name Address (Number, Street, City, State and ZIP Code)			case	
Pai	t 11: Give Details About Your Business or Conn	ections to Any Business				
27.	Within 4 years before you filed for bankruptcy, di	id you own a business or have ar	ny of	the following connections to any	business?	
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time					
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)					
	☐ A partner in a partnership					
	☐ An officer, director, or managing executive of a corporation					
	☐ An owner of at least 5% of the voting or equity securities of a corporation					
	An owner of at least 5% of the voting of 6	quity securities of a corporation				

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Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inform	nation to identify your o	ase:		
Debtor 1	Sharon Keith			
Dobtor 2	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	—
United States Bar	nkruptcy Court for the:	NORTHERN DIST	RICT OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official For				_
Statemen	t of Intentio	n for Indiv	iduals Filing Under Ch	apter 7 12/15
If you are an indiv	vidual filing under chap	oter 7 vou must fill	out this form if	
	claims secured by you	. •	out this form in.	
	ed personal property a			
You must file this whichever on the form	ver is earlier, unless the	thin 30 days after ye court extends the	you file your bankruptcy petition or by the time for cause. You must also send copie	date set for the meeting of creditors, es to the creditors and lessors you list
	ople are filing together d date the form.	in a joint case, bot	h are equally responsible for supplying co	orrect information. Both debtors must
	nd accurate as possibl our name and case num		needed, attach a separate sheet to this fo	rm. On the top of any additional pages,
Part 1: List Yo	ur Creditors Who Have	Secured Claims		
1 For any credito	ors that you listed in Pa	rt 1 of Schedule D:	Creditors Who Have Claims Secured by P	Property (Official Form 106D), fill in the
information be	low.		·	
identify the cre	ditor and the property th	iat is collateral	What do you intend to do with the prope secures a debt?	rty that Did you claim the property as exempt on Schedule C?
Creditor's Al	ly Financial		☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	=
Description of	2015 Chevrolet Soi	nic 4000	Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property	miles		☐ Retain the property and [explain]:	
securing debt:				
Part 2: List Yo	ur Unexpired Personal	Property Leases		
For any unexpired	d personal property lea	se that you listed i	n Schedule G: Executory Contracts and U expired leases are leases that are still in ef	nexpired Leases (Official Form 106G), fill
			he trustee does not assume it. 11 U.S.C. §	
Describe your ur	nexpired personal prop	erty leases		Will the lease be assumed?
l accordo nomo:		<u>-</u>		
Lessor's name: Description of lease	sed			□ No
Property:				☐ Yes
Lessor's name:				□ No
Description of leas	sed			_
Property:				☐ Yes
Lessor's name:				□ No

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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Del	btor 1	Sharon Keith	Case number (if known)
Des	scription	n of leased	
Pro	perty:		☐ Yes
	ssor's na	ame: n of leased	□ No
	perty:	. 6. 164664	☐ Yes
	ssor's na	ame: n of leased	□ No
	perty:	Torreased	☐ Yes
	ssor's na	ame: n of leased	□ No
	perty:	Torreased	☐ Yes
	ssor's na		□ No
	scription perty:	n of leased	☐ Yes
Par	rt 3:	Sign Below	
		alty of perjury, I declare that I have inc at is subject to an unexpired lease.	ated my intention about any property of my estate that secures a debt and any personal
X		haron Keith	X
		on Keith ture of Debtor 1	Signature of Debtor 2
	Date	August 9, 2016	Date

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-25560 Doc 1 Filed 08/09/16 Entered 08/09/16 14:48:04 Desc Main Document Page 47 of 51

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In r	e Sharon Keith		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN	SATION OF ATTOR	NEY FOR DE	EBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy,	or agreed to be paid	to me, for services re	t endered or to
	For legal services, I have agreed to accept		\$	990.00	
	Prior to the filing of this statement I have received			50.00	
	Balance Due			940.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compen	nsation with any other person u	unless they are mem	bers and associates c	of my law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name				law firm. A
5.	In return for the above-disclosed fee, I have agreed to reno	der legal service for all aspects	of the bankruptcy c	ase, including:	
	a. Analysis of the debtor's financial situation, and renderingb. Preparation and filing of any petition, schedules, statentc. Representation of the debtor at the meeting of creditorsd. [Other provisions as needed]	nent of affairs and plan which	may be required;	-	cruptcy;
6.	By agreement with the debtor(s), the above-disclosed fee of	does not include the following	service:		
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of any a bankruptcy proceeding.	agreement or arrangement for	payment to me for re	epresentation of the	debtor(s) in
	August 9, 2016	/s/ Joseph F Lenti	ner		
1	Date	Joseph F Lentner			
		Signature of Attorney Swanson & Desai			
		670 W Hubbard	,		
		Suite 202 Chicago, IL 60654			
		312-666-7882 Fax			
		kc@chicagobankı		m	
		Name of law firm			

United States Bankruptcy CourtNorthern District of Illinois

		1 (of the District of Immors		
In re	Sharon Keith		Case No.	
		Debtor(s)	Chapter	7
	V	ERIFICATION OF CREDITOR N	AATRIX	
		Number of	f Creditors:	29
	The above-named Debtor(s (our) knowledge.	s) hereby verifies that the list of credi	itors is true and c	correct to the best of my

Ally Financial 200 Renaissance Ctr Detroit, MI 48243

Ally Financial Po Box 380901 Bloomington, MN 55438

Cda/Pontiac 415 E Main St Streator, IL 61364

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Cda/Pontiac 415 E Main St Streator, IL 61364

Cda/Pontiac Attn:Bankruptcy Po Box 213 Streator, IL 61364

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Cda/Pontiac Attn:Bankruptcy Po Box 213 Streator, IL 61364

Check into cash 3158 Singing Hills Blvd Sioux City, IA 51102

Check N GO 4501 Souther Hills Dr ste 23 Sioux City, IA 51106 Comcast 350 N. Wolf Road Mount Prospect, IL 60056

Commonwealth Financial Systems 245 Main Street Scranton, PA 18519

Commonwealth Financial Systems 245 Main St Dickson City, PA 18519

ERC/Enhanced Recovery Corp 8014 Bayberry Rd Jacksonville, FL 32256

Escallate LLC 5200 Stoneham Rd North Canton, OH 44720

Escallate LLC Attn:Bankruptcy 5200 Stoneham Rd Ste 200 North Canton, OH 44720

Hawkeye Adjustment 2300 Pierce St Sioux City, IA 51104

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IC Systems, Inc Po Box 64378 Saint Paul, MN 55164 IC Systems, Inc 444 Highway 96 East Po Box 64378 St Paul, MN 55164

Med Business Bureau 1460 Renaissance D Park Ridge, IL 60068

Med Business Bureau 1460 Renaissance Dr Suite 400 Park Ridge, IL 60068

Mercy Medical Center 801 5th St Sioux City, IA 51101

Methodist Hospital 600 Grante st Gary, IN 46402

Midamerican Energy PO box 657 Des Moines, IA 50306

St Lukes Medical Center 2720 Stone Park Blvd Sioux City, IA 51104

Wow PO Box 5715 Carol Stream, IL 60197